

Montana Department of Agriculture – Organic Certification Program

Previous Land Manager Affidavit

APPLICANT	FARM / RANCH / BUSINESS NAME (IF DIFFERENT)
LEGAL DESCRIPTION OF PROPERTY (TOWNSHIP – RANGE – SECTION)	FIELD NUMBER(S)

The purpose of this form is to document that the property listed above qualifies for organic certification by the Montana Department of Agriculture (MDA) Organic Certification Program according to National Organic Program (NOP) rules. Pertinent NOP rules include:

§ 205.103 Recordkeeping by certified operations. (b) Such records must: (4) Be sufficient to demonstrate compliance with the Act and the regulations in this part.

§ 205.202 Land requirements. Any field or farm parcel from which harvested crops are intended to be sold, labeled, or represented as "organic," must: (b) Have had no prohibited substances ... applied to it for a period of 3 years immediately preceding harvest of the [organic] crop; ...

§ 205.105 Allowed and prohibited substances, methods, and ingredients in organic production and handling. To be sold or labeled as "100 percent organic," "organic," or "made with organic (specified ingredients or food group(s))," the product must be produced and handled without the use of:

- (a) **Synthetic substances** and ingredients, except as provided in § 205.601 or § 205.603;
- (b) **Nonsynthetic substances prohibited** in § 205.602 or § 205.604;
- (c) **Excluded methods** [genetic engineering], ...
- (d) **Ionizing radiation**, ... and
- (e) **Sewage sludge**.

It is the applicant's responsibility to document that any land to be used for certified organic production qualifies under the standards listed above. The MDA may require additional documentation, including but not limited to Federal Crop Insurance Corporation (FCIC) or Farm Service Agency (FSA) records. By submitting this form along with an application for organic certification, the applicant grants the MDA permission to request and review all such records.

To qualify land that has not been under the applicant's control for at least the past three years, this form must be completed and verified by the previous land manager. This form must be signed by the applicant and the previous land manager (or representative). A previous land manager is someone who had managerial control of the property during the past three years.

PREVIOUS LAND MANAGER NAME		
PREVIOUS LAND MANAGER MAILING ADDRESS		
CITY	STATE	ZIP
PREVIOUS LAND MANAGER PHONE NUMBER(S)		

Have synthetic fertilizers been applied to this property in the last 36 months? ☐ Yes ☐ No

Have synthetic pesticides been applied to this property in the last 36 months? ☐ Yes ☐ No

Have any (other) prohibited materials been applied to this property in the last 36 months?

I certify that the information listed above and on the reverse side of this form is correct with regards to the management of the property described above.

Signature of Previous Land Manager

Date _____

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Please list all materials applied to the property listed on the reverse side of this form in the last 36 months. This list should include fertilizers, herbicides, pesticides, fungicides and any treated seeds as well as all other input materials. The previous land manager must verify the information by signing on the reverse side of this form.

[illegible]